Γ		CL	AIMS A	S FILED - PART I (Column 1) (Column 2)				SMALL		09916 OTHER THAN			
17	OTAL CLAIMS						umn 2)	n	TYPE		_0	SMALL	ENTITY
-	FOR			 		1	mi ut	4	RATE	FEE	4	RATE	FEE
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⊩	TOTAL CHARGEABLE CLAIMS			4.2m	inus 20=	23			X\$ 9=	1	OF	X\$18-	414
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•	If the difference	less than zero, enter "0" in column 2			•			JOF	<u> </u>	7			
	<i>d</i> , , C	LAIM	IS AS &	MENDE	D - PAR	T 11			TOTAL	<u> </u>	JOF		004
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	FIRST PRESENTATION OF ML			ULTIPLE DE	PENDENT	CLAIM	IM]	 	-	OR		\
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Application or Docket Number